

Candidate signature (n ink)

Form CPF M 102: Campaign Finance Report Municipal Form · Office of Campaign and Political Finance

le with: ty or Town Clerk or Election Commission Please print or type all in	nformation, except signatures.
Fill in dates: Month Date Y	rear Dete 31, 2019 Ending December 31, 2019
Type of report: (Check one) □8th day preceding preliminary □8th day preceding elect	tion 30 day after election byear-end report dissolution
Full Name of Candidate (if applicable) Select BOARD Office Sought and District 59 First Bridge Rd. Groton, MA 01450 Residential Address Tel. No. (optional)	The Committee to Ever John Reilly Committee Name Steven W. Kreatz Name of Committee Treasurer SUFITCH BRIAGE RA. Groton, MA 81450 Committee Mailing Address Tel. No. (optional)
SUMMARY BALA Line 1: Ending balance from pre Line 2: Total receipts this period Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this p Line 5: Ending balance (line 3 minus Line 6: Total in-kind contributions Line 7: Total (all) outstanding liabi Line 8: Name of bank(s) used W	(page 2, line 11) S S J, 35 Seriod (page 3, line 14) S S line 4) S Line 4) S Line 4) S S S S S S S S S S S S S
finance activity, including all contributions, loans, receipts, expenditures, disbucampaign finance activity of all persons acting under the authority or on behalf Signed under the p	enalties of perjury: 1/18/30 Date
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the commit I certify that I have examined this report including attached schedules and it is finance activity, of all persons acting under the authority or on behalf of this contributions, incurred any liabilities nor made any expenditures on my behalf Candidate without Committee OR Candidate with independent activity	a, to the best of my knowledge and belief, a true and complete statement of an eampaign committee in accordance with the requirements of M.G.L. c. 55. I have not received any furning this reporting period. it filling separate report s, to the best of my knowledge and belief, a true and complete statement of all campaign sements, in-kind contributions and liabilities for this reporting period and represents the fof this committee in accordance with the requirements of M.G.L. c. 55.

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

miniber on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amoun	d Occupation & Employer (for contributions of \$200 or more)
, interest of	·		
	otal receipts in excess of \$50 (or listed above)		
Line 10: T	otal receipts \$50 and under* (not listed above) OTAL RECEIPTS IN THE PERIOD	A	Enter on page 1, line 2

If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

Page 2

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

umber on each Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
•				
·				-
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		·		
			·	
			·	
		·		
				,
	·			
		Line 1	2: Expenditures over \$50 3: Expenditures \$50 and under*	
	Enter on page 1, line 4		3: Expenditures 350 and under 14: TOTAL EXPENDITURES	<u>a</u>

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3 itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
· · · · · · · · · · · · · · · · · · ·				
•				
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
	Enter on page 1, line 6	Line 17:	Total In-kind	-0-

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
4/13/19 4/30/19	JOHN F Reiny	59 FireH BRIDGE RS. GROTON, MA 01450	STAMPING SCREWS STAMPES FOR POPING SIGNS.	13,68
				//
	Enter on page 1, line 7	Line 18: OUTSTANDING	FLIABILITIES (ALL)	\$32,81